

Special Dietary Needs

In The Child and Adult Care Food Program

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Recent Trends

- Food allergy is a growing public health concern in the U.S.
- The incidence of food allergy is highest in young children – one in 17 among those under age 3.
- Eight foods account for 90 percent of all food-allergic reactions in the U.S.: milk, eggs, peanuts, tree nuts(e.g., walnuts, almonds, cashews, pistachios, pecans), wheat, soy, fish, and shellfish.

Source: The Food Allergy & Anaphylaxis Network

Federal Laws

- Section 504 of the Rehabilitation Act of 1973 and The ADA (American s with Disabilities Act) of 2008
 - 1.) Physical/mental impairment limiting one or more major life activities
 - 2.) Has a record of such an impairment
 - 3.) Is regarded as having such an impairment
- The Individuals with Disabilities Education Act (IDEA)
 - 1.) evaluated as having one or more of the disability categories
 - 2.) educational performance is adversely affected
 - 3.) because of an adverse impact, the child needs special education and related services

Disability or Not?

COMMON DISABILITIES THAT REQUIRE FOOD ACCOMMODATIONS:

- Diabetes
- Celiac Disease
- Life-threatening food allergies (causing anaphylaxis)
- Phenylketonuria (PKU)

OTHER SPECIAL DIETARY NEED (NOT A DISABILITY) THAT MAY REQUEST FOOD ACCOMMODATIONS:

- Most food allergies (not life-threatening)
- Food intolerance
- Religious reasons
- Vegetarians
- Personal preferences

Food Allergies: Clarification

Definition: when the immune system mistakenly attacks a food protein. Ingestion of the offending food may trigger the sudden release of chemicals resulting in symptoms of an allergic reaction.

Disability or not?

Cross-Contamination

- Hand washing before and after meals
- Use separate preparation and cooking equipment
- Limit food consumption to a designated dining area.
- Wash dishes thoroughly

Begin With a Plan

- Step 1-Create a written process for parents to request special dietary accommodations
 - Request a medical statement
 - Set up a meeting with parents
- Step 2-Train Staff on their responsibilities
- Step 3-Implement record keeping procedures
 - Set up a filing system
 - Update medical statements periodically

Medical Statements

Disabilities:

- the child's disability
- an explanation of why the disability restricts the child's diet
- the major life activity affected by the disability
- the food or foods to be omitted from the child's diet
- the food or choice of foods that must be substituted

Other Special dietary need (not a disability):

- an identification of the medical or other special dietary condition which restricts the child's diet
- the food or foods to be omitted from the child's diet
- the food or choice of foods to be substituted.

Staff Training

- ◉ NFSMI Webinars
- ◉ NFSMI's Care Connect-Special Needs in Child Care
- ◉ USDA's Healthy Meals Resource
- ◉ Registered Dietitian
- ◉ State Agency

Reimbursement through CACFP

- Meals will be reimbursed if they include all of the required components

Exceptions include:

- Disability with medical statement
- Nondisability with a medical statement

*If a substitution is made for non-medical reasons, then they must meet CACFP meal requirements to be reimbursed.

Additional Resources

- ◉ USDA's Accomodating children with special dietary needs guidance
- ◉ Connecticut State Department of education, accommodating special diets: child care programs
- ◉ NFSMI's Handbook for Children with Special Food and Nutrition Needs
- ◉ Special Needs Fact Sheets

Questions?

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